

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|------------|--------|---------|
| FEE DETERMINATION | <i>map</i> | | 1/2/00 |
| O.I.P.E. CLASSIFIER | | 48 | 1/24/00 |
| FORMALITY REVIEW | | 65203 | 2-12-00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------|----------|
| Final | |
| Original | 10/27/03 |
| 1 | 2/26/02 |
| 2 | 6/6/03 |
| 3 | 11/3/03 |
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| Claim | Date |
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| Final | |
| Original | 10/27/03 |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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